PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10748518

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20		10010			RATE	FEE	טא ד	RATE	FEE	
FOR			7			SO EVEDA		BASIC FEI		-		 	
			NUMBER FILED			BER EXTRA		BASIC FEI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			30 mi	nus 20=	* (6	2		X\$ 9=		OR	X\$18=	180	
INDEPENDENT CLAIMS			/	inus 3 =	*			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	950	
CLAIMS AS AMENDED - PART II									•	_	OTHER	THAN	
		(Column 1)	(Column 2			(Column 3)	. <u>.</u>	SMALL	ENTITY	OR	SMALL	ENTITY	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	Ī	X43=		OR	X86=		
L	FIRST PRESE	ENTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT, FEE		
		Α	ADDIT. FEE		•	ADDII. FEE							
AMENDMENT B		(Column 1) CLAIMS REMAINING		(Colum HIGHE NUMB	ST	(Column 3) PRESENT	ſ		ADDI-	l		ADDI-	
		AFTER AMENDMENT		PREVIO PAID F	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .	l	X43=		OR	`X86=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		╏						
								+145=		OR	+290=	•	
							A	TOTAL DDIT: FEE		OR ,	TOTAL DDIT. FEE		
(Column 1) (Column 2) (Column 3)												•	
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	ı	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						` -	7.10-		OR	7.00-		
* 14	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								4	OR	+290=		
**	f the "Highest Nu	mber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	ΑD	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE		
		hber Previously Paid					foun	d in the app	ropriate box	in colu	mn 1.		